

RECEIVED  
CENTRAL FAX CENTER

NO. 329 P. 4

DEC 07 2004

PTO/82/22 (10-04)

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 015270-008448US	
FY 2008 (fee effective on or after October 1, 2004)			
Application Number 09/724,569		Filed November 28, 2000	
For BETA-SECRETASE ENZYME COMPOSITIONS AND METHODS			
Art Unit 1652		Examiner Malgorzata A. Walloka	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490	\$ _____
<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765	\$ 1530
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/98). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,397</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
<u>Rosemarie L. Celli</u> Signature Rosemarie L. Celli, Reg. No. 42,397 Typed or printed name		<u>December 7, 2004</u> Date 650-326-2400 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

60372998 v1

12/13/2004 TSUBBS 09:00006 201430 09724569  
01 FC:1254 1530 DA

CASE applied  
only